

General

Title

Bladder cancer: number of radical cystectomy procedures performed by a surgeon over a 1 year period.

Source(s)

NHS Scotland, Scottish Cancer Taskforce, National Cancer Quality Steering Group. Bladder cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Jun. 38 p. [19 references]

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Structure

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the number of radical cystectomy procedures performed by a surgeon over a 1 year period.

Note from the National Quality Measures Clearinghouse: This measure is part of the Cancer Quality Performance Indicators (QPIs) collection. For more information, including a complete list of QPI measure sets, please visit the [Healthcare Improvement Scotland Web site](#).

Rationale

Although evidence has shown varied results, recent studies have shown that there is a positive relationship between volume and re-intervention rates (Mayer et al., 2010; Mayer et al., 2011).

Within each network, bladder cancer should be managed by multidisciplinary teams, with surgical and other radical treatments administered by those with appropriate expertise and caseloads (Scottish Intercollegiate Guidelines Network [SIGN], 2005).

Evidence for Rationale

Mayer EK, Bottle A, Aylin P, Darzi AW, Athanasiou T, Vale JA. The volume-outcome relationship for radical cystectomy in England: an analysis of outcomes other than mortality. *BJU Int.* 2011 Oct;108(8 Pt 2):E258-65. [PubMed](#)

Mayer EK, Bottle A, Aylin P, Darzi AW, Athanasiou T, Vale JA. The volume-outcome relationship for radical cystectomy in England: retrospective analysis of hospital episode statistics. *BMJ.* 2010 Mar 19;340:c1128. [PubMed](#)

NHS Scotland, Scottish Cancer Taskforce, National Cancer Quality Steering Group. Bladder cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Jun. 38 p. [19 references]

Scottish Intercollegiate Guidelines Network (SIGN). Management of transitional cell carcinoma of the bladder. A national clinical guideline. Edinburgh (Scotland): Scottish Intercollegiate Guidelines Network (SIGN); 2005 Dec. 45 p. (SIGN publication; no. 85). [161 references]

Primary Health Components

Radical cystectomy procedures; volume of cases per surgeon

Denominator Description

This measure applies to surgeons who perform radical cystectomy procedures (one surgeon at a time).

Numerator Description

Number of radical cystectomy procedures performed by each surgeon in a given year

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The collection of data is piloted on a small number of patient records using a paper data collection form produced by the Information Services Division (ISD). The aim is to identify any anomalies or difficulties

with data collection prior to full implementation. At least one NHS board in each Regional Cancer Network participates in the pilot.

Evidence for Extent of Measure Testing

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Hospital Inpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Individual Clinicians or Public Health Professionals

Statement of Acceptable Minimum Sample Size

Does not apply to this measure

Target Population Age

Does not apply to this measure

Target Population Gender

Does not apply to this measure

National Strategy for Quality Improvement in Health

Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Not within an IOM Care Need

IOM Domain

Not within an IOM Domain

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Professionals/Staff

Denominator (Index) Event or Characteristic

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

This measure applies to surgeons who perform radical cystectomy procedures (one surgeon at a time).

Exclusions

None

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of radical cystectomy procedures performed by each surgeon in a given year

Exclusions

None

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Count

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Prescriptive Standard

Target: Minimum 10 procedures per surgeon in a 1 year period.

This is a minimum target level and is designed to ensure that all surgeons performing radical cystectomy perform a minimum of 10 procedures per year.

Note: Varying evidence exists regarding the most appropriate target level for surgical case volume. In order to ensure that the target level takes account of level 1 evidence and will drive continuous quality improvement as intended this performance indicator will be kept under regular review.

It is recognised that multiple factors affect overall performance and that the end point focus must be clinical outcomes in what is a team delivered goal. It is recommended that where two consultants operate together on the same patient each should count the case in his/her numbers as this best reflects the partnership accountability of such shared procedures.

Evidence for Prescriptive Standard

NHS Scotland, Scottish Cancer Taskforce, National Cancer Quality Steering Group. Bladder cancer clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Jun. 38 p. [19 references]

Identifying Information

Original Title

QPI 8 – volume of cases per surgeon.

Measure Collection Name

Cancer Quality Performance Indicators (QPIs)

Measure Set Name

Bladder Cancer

Submitter

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Developer

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Funding Source(s)

Scottish Government

Composition of the Group that Developed the Measure

Bladder Cancer QPI Development Group

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2016 Jun

Measure Maintenance

The Cancer Quality Performance Indicators (QPIs) will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

Date of Next Anticipated Revision

2018 Feb

Measure Status

This is the current release of the measure.

Measure Availability

Source document available from the [Healthcare Improvement Scotland Web site](#) .

For more information, contact the Healthcare Improvement Scotland at Gyle Square, 1 South Gyle Crescent, Edinburgh, Scotland EH12 9EB; Phone: 0131 623 4300; E-mail: comments.his@nhs.net; Web site: www.healthcareimprovementscotland.org/ .

Companion Documents

The following is available:

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p. This document is available from the [Healthcare Improvement Scotland Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on May 3, 2017. The information was verified by the measure developer on May 23, 2017.

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Production

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